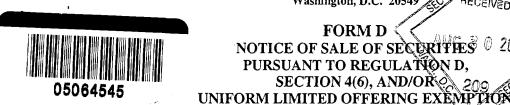
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PARKIN	



	UNITED STATES
PETIDITIES	AND EVOUANCE CO

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 RECEIVED

FORM D

NOTICE OF SALE OF SECERITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

Expires: April 30, 2008 Estimated average burden Gours per response......16.00 SEC USE ONLY Prefix Serial

DATE RECEIVED

OMB Number:

D E OMB APPROVAL

3235-0076

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Sale of Series B Preferred Stock Filing Under (Check box(es) that apply): 
Rule 504 ☐ ULOE Rule 505 X Rule 506 Section 4(6) Type of Filing: New Filing ☐ Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer. Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code 2189 Leghorn Street, Mountain View, CA 94043 650-210-5555 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) SAME SAME AS ABOVE Brief Description of Business Products and Services related to Network Infrastructure Type of Business Organization corporation ☐ limited partnership, already formed other (please specify): business trust ☐ limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: 0 3 0 4 Actual ☐ Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State:

### GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

		A. BASIC IDENTI	FICATION DATA		1
2. Enter the information re					
		as been organized within the pa	=		
		o vote or dispose, or direct the voorate issuers and of corporate			
	naging partner of part		general and managing partiters	or partitionship issue	crs, and
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	·	,		
Business or Residence Addre	acc (Number and St	reet City State Zin Code)			<del></del>
2189 Leghorn Street, Mour		• • • • •			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Valerie Wilson	f individual)				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)	7.00		
2189 Leghorn Street, Mour	ntain View, CA 940	043			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Gaurav Garg	f individual)				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
2189 Leghorn Street, Mour					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i Matthew Murphy	f individual)			•	
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
2189 Leghorn Street, Mour					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i Daniel Warmenhoven	f individual)				
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)			
2189 Leghorn Street, Moun	tain View, CA 940	)43			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Stephen Van Beaver	f individual)				
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			
2189 Leghorn Street, Moun	tain View, CA 940	)43			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Sequoia Capital XI	f individual)				
Business or Residence Addre	ss (Number and Str	reet, City, State, Zip Code)			<u></u>
3000 Sand Hill Road, Build		•			

	A. BASIC IDENTI	FICATION DATA		
2. Enter the information requested for the fol	has been organized within the poor vote or dispose, or direct the porate issuers and of corporate	vote or disposition of, 10% or		- · · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:  Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)  KPCB Holdings, Inc., as Nominee				
Business or Residence Address (Number and S 2750 Sand Hill Road, Menlo Park, CA 94025	•			
Check Box(es) that Apply:  Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Integral Capital Partners VII, L.P.				
Business or Residence Address (Number and S 3000 Sand Hill Road, Building 3, Suite 240, N				
Check Box(es) that Apply:  Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Pilot House Ventures Group, LLC	6': 6: 4 7': 6 1		<del> </del>	
Business or Residence Address (Number and S The Pilot House, Lewis Wharf, Boston, MA	•			,
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
The Kruep Family Trust, Dated 4/14/00, Rar		J. Kruep, Trustees		
Business or Residence Address (Number and St 2189 Leghorn Street, Mountain View, CA 94	• •			
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and St	treet, City, State, Zip Code)			
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	<del></del>			
Business or Residence Address (Number and St	reet, City, State, Zip Code)			

				•	В. 1	NFORMA	TION ABO	OUT OFFE	RING				
1.	Has the	e issuer solo	l, or does th	e issuer int		to non-acci						Yes	No ⊠
2.	What is	the minim	um investn	nent that wi	ll be accep	ted from an	y individua	1?	······································		*************	\$( Yes	0.0000
3.													No
!	commis offering with a	ssion or si g. If a pers state or sta	milar remu on to be lis tes, list the	neration for ted is an as name of th	or solicitati sociated pe le broker o	who has been ion of purce or age or age or dealer. If the information is the information is the information in the information	hasers in not of a brolumore than	connection ker or deale five (5) pe	with sales r registered rsons to be	of security with the State are	es in the EC and/or		
Full 1	Name (	Last name	first, if indi	vidual)									
Busir	ness or	Residence	Address (N	umber and	Street, City	, State, Zip	Code)						
Name	of As	sociated Br	oker or Dea	ıler									
States	s in Wh	ich Person	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers						• .
(C	heck "A	All States"	or check ind	ividuals St	ates)						••••••	🗆 A	All States
[4	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[]	L]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[]	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[]	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Vame (1	Last name	first, if indiv	/idual)									
Busin	ess or	Residence .	Address (No	ımber and S	Street, City	, State, Zip	Code)		<del>- 111 · · · · · · · · · · · · · · · · · </del>				
Name	of Ass	sociated Br	oker or Dea	ler		·					·,- ·, -	-	
States	in Wh	ich Person	Listed Has	Solicited or	r Intends to	Solicit Pur	chasers						
(Ci	heck "A	All States"	or check ind	lividuals St	ates)				••••••			🗆 А	Il States
[A	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
. [1	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[]	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[]	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Varne (1	Last name	irst, if indiv	vidual)									
Busin	ess or l	Residence .	Address (Nu	imber and S	Street, City	, State, Zip	Code)						
Name	of Ass	sociated Br	oker or Dea	ler									
States	in Wh	ich Person	Listed Has	Solicited or	Intends to	Solicit Pure	chasers	-				****	
(Cl	neck "A	All States"	or check ind	lividuals Sta	ates)		······································				•••••	🔲 А	ll States
[/	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[]	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[]	AT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
rp	17	(SC)	(SD)	ITNI	(TX)	HT	IVT)	[VA]	[WA]	rwv1	rwn	IWYI	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCE	EDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate ffering Price	A	mount Already Sold
	Debt	\$_	0.00	\$	0.00
	Equity	\$	19,799,447.75	\$	19,799,447.75
	☐ Common ☒ Preferred	_			
	Convertible Securities (including warrants)	\$	0.00	\$	0.00
	Partnership Interests	s -	0.00		0.00
	Other (Specify)		0.00		0.00
	Total	_			
	Answer also in Appendix, Column 3, if filing under ULOE.	» —	19,799,447.75	ъ.	19,799,447.75
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	r	Aggregate Pollar Amount of Purchase
	Accredited Investors		25	\$	19,799,447.75
	Non-accredited Investors		0	\$	0.00
	Total (for filings under Rule 504 only)		0	\$	0.00
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		Type of	n	ollar Amount
	Type of Offering		Security	_	Sold
	Rule 505		N/A	\$	0.00
	Regulation A		N/A	\$_	0.00
	Rule 504		N/A	\$	0.00
	Total			\$_	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.	y			
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees		⊠	\$	20,000.00
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	<del></del>
	Other Expenses (identify)		$\overline{\Box}$	\$	<del></del>
	Total		×	` - \$	20,000.00
				-	

	C. OFFERING PI	RICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCI	EEDS			
,	total expenses furnished in response to Pa	ate offering price given in response to Part C — Question 1 art C — Question 4.a. This difference is the "adjusted gr	oss		\$	19,7	79,447.75
5.	of the purposes shown. If the amount for a	ross proceeds to the issuer used or proposed to be used for early purpose is not known, furnish an estimate and check the beginning payments listed must equal the adjusted gross proceeds to stion 4.b above.	ох	Payments to			
				Officers, Directors, & Affiliates		•	nents to hers
	Salaries and fees			\$	00 [	] \$	0.00
	Purchase of real estate			] \$0.0	<u> </u>	] \$	0.00
	Purchase, rental or leasing and installation of	f machinery and equipment		\$0.0	_ 90	] \$ <u></u>	0.00
	Construction or leasing of plant buildings an	d facilities		] \$ 0.0	_ 90 ⊑	 ] \$	0.00
		ne value of securities involved in this offering that may es of another issuer pursuant to a merger)			_ <u>∞</u> ⊏	] \$	0.00
	Repayment of indebtedness			\$0.0	00 [	] \$	0.00
	Working capital			\$0.0	_ 00 🗵	\$19 <u>,</u>	779,447.75
	Other (specify):			\$0.0	00 [	\$	0.00
Col				\$ 0.0	_ 0 🗵	\$19,	779,447.75
	Total Payments Listed (column totals added)			⊠ \$_	19,	779,44	7.75
		D. FEDERAL SIGNATURE					
sig	nature constitutes an undertaking by the issu	ned by the undersigned duly authorized person. If this notice to furnish the U.S. Securities and Exchange Commission coredited investor pursuant to paragraph (b)(2) of Rule 502.					
Iss	uer (Print or Type)	Signature		Date			<del></del>
Sto	ke, Inc.	Breet a. Rethu		8-24-	05		
Na	me of Signer (Print or Type)	Title or Signer (Print or Type)					
Br	ett Pletcher	Assistant Secretary					
	T_44:	omissions of fact constitute federal criminal violations (S	00.16	TICC 1001	`		

# APPENDIX

1		2	3			4			5 lification		
	non-ac	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
<b>C</b>				Number of Accredited		Number of Non-Accredited			, , , , ,		
State AL	Yes	No	Series B Preferred Stock	Investors	Amount	Investors	Amount	Yes	No		
AK				·			· · · · · · · · · · · · · · · · · · ·				
AZ				<u></u>				<u> </u>			
AR				<u> </u>							
CA		х	\$14,443,626.29	14	\$14,443,626.29	0	\$0.00		x		
СО	<u> </u>										
CT											
DE											
DC											
FL				· · · · · · · · · · · · · · · · · · ·							
GA											
HI				:·.							
ID											
IL		· X	\$10,987.34	1	\$10,987.34	0	\$0.00		х		
IN											
IA											
KS											
KY				<del> </del>			-				
LA											
ME			-								
MD											
MA		Х	\$5,000,001.17	1	\$5,000,001.17	0	\$0.00		Х		
MI		х	\$10,989.31	1	\$10,989.31	0	\$0.00		X		
MN		х	\$21,978.62	1	\$21,978.62	0	\$0.00		х		
MS											

# APPENDIX

1_		2	3			4			5
	non-actinvestor	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		under St (if yes explan waiver	lification ate ULOE , attach action of granted -Item 1)			
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	4	Number of Non-Accredited Investors	A	Vas	N
State MO	I tes	No	Series & Freierred Stock	Tilvestors	Amount	Investors	Amount	Yes	No ·
MT	<del> </del>							· -	
NE								<u> </u>	
NV									
NH									
NJ		х	\$165,931.91	3	\$165,931.91	0	\$0.00		х
NM					·				
NY									
NC									
ND									
ОН									
OK									
OR									
PA		X	\$49,999.01	1	\$49,999.01	0	\$0.00		х
RI									
SC			•						
SD									
TN									
TX		х	\$95,934.10	3	\$95,934.10	0	\$0.00		х
UT	ļ								
VT									
VA									
WA									
wv									
WI									

# APPENDIX

A.

1	2	2	3			4			5
	Intend to non-accommendate investors (Part B-	redited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted -Item 1)
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									